Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	11/13/08	Address:	Bufflehead Pond
Case #:	<u>22-43818</u>		Tri-County Fish&Wildlife
County:	Noble		
Type of Laboratory Scizure (check one) Operational Lab		Seizure Location (Hotel/Motel
Dumpsi	al/Glassware/Equipment (only) te (only)	☐ Outbuilding☐ Vehicle	Open – No Structure Other:
Items Four	ad: Location (bedroom, kitchen, open ai	r, etc)	
(check all that apply) Lithium/Ammonia Reaction(s):			
Red Phosphorous/Iodine Reaction(s):			
☐ Flammable Solvents:			
☐ Water Reactive Metal (Lithium):			
Anhydrous Ammonia:			
☐ Hydrochloric Acid Gas Generator(s): outside			
Corrosive Acid:			
Corrosive Base:			
Other (item and location):			
£35.41.T. 1	10.14		
∏ Yes — ⊠ No	r age 18 discovered (check one) (number present)	☐ Ephedring ☐ Retail/Mc	e Information Describedation Tracking Log Schant Tip
	port to Child Protective Services	⊠ Other:	
<u>This report</u>	is to be faxed to the following agen	cies that serve the lo	cation:
Fire Departr	nent: <u>Sparta Twp.</u>	Fax: <u>260-85</u>	
Health Department: Noble County		Fax: <u>(260) (</u> Fax:	
Child Protec	tion Service:		
For further information regarding this methamphetamine laboratory, contact Investigating Officer: McCay Phone 574-546-4900			

This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.